

RM Water Damage Restoration LTD
Profit and Loss
January - December 2024

	<u>Total</u>
Income	
Sales	3,131,253.00
Total Income	\$ 3,131,253.00
Cost of Goods Sold	
COS	1,216,541.00
Total Cost of Goods Sold	\$ 1,216,541.00
Gross Profit	\$ 1,914,712.00
Expenses	
Auto	77,718.00
Waste Management	24,404.00
Marketing	115,112.00
Job Supplies	65,119.00
ER Payroll Taxes	75,414.00
Office Expenses	12,100.00
Professional Services	512,050.00
Subscriptions & Professional Svcs	78,621.00
Supplies	35,119.00
Insurance Expense	42,686.00
Legal & Professional	41,248.00
Taxes & Licenses	3,578.00
Wages	744,455.00
Utilities	25,093.00
Total Expenses	\$ 1,852,717.00
Net Operating Income	\$ 61,995.00
Other G&A Expenses	110,106.00
Other Expenses	52,205.00
Total Other Expenses	\$ 52,205.00
Net Other Income	-\$ 52,205.00
Net Income	\$ 9,790.00

Department of the Treasury
Internal Revenue Service

For calendar year 2023 or tax year beginning _____, 2023, ending _____, 20 _____

2023

A Check if:
1a Consolidated return (attach Form 851) ☐
b Life/nonlife consolidated return ☐
2 Personal holding co. (attach Sch. PH) ☐
3 Personal service corp. (see instructions) ☐
4 Schedule M-3 attached ☐

TYPE OR PRINT
Name
RM WATER DAMAGE RESTORATION LTD
Number, street, and room or suite no. If a P.O. box, see instructions.
1049 CHURCH RD
City or town, state or province, country and ZIP or foreign postal code
Toms River, NJ 08755

B Employer identification number
92-1262131
C Date incorporated
01/02/2023
D Total assets (see instructions)
\$ _____

E Check if: (1) ☒ Initial return (2) ☐ Final return (3) ☐ Name change (4) ☐ Address change

Income	1a Gross receipts or sales	1a 4,105,456.	
	b Returns and allowances	1b	
	c Balance. Subtract line 1b from line 1a	1c 4,105,456.	
	2 Cost of goods sold (attach Form 1125-A)	2 651,141.	
	3 Gross profit. Subtract line 2 from line 1c	3 3,454,315.	
	4 Dividends and inclusions (Schedule C, line 23)	4	
	5 Interest	5	
	6 Gross rents	6	
	7 Gross royalties	7	
	8 Capital gain net income (attach Schedule D (Form 1120))	8	
	9 Net gain or (loss) from Form 4797, Part II, line 17 (attach Form 4797)	9	
Deductions (See instructions for limitations on deductions.)	10 Other income (see instructions - attach statement)	10	
	11 Total income. Add lines 3 through 10.	11 3,454,315.	
	12 Compensation of officers (see instructions - attach Form 1125-E)	12	
	13 Salaries and wages (less employment credits)	13 399,258.	
	14 Repairs and maintenance	14	
	15 Bad debts	15	
	16 Rents	16	
	17 Taxes and licenses	17 42,611.	
	18 Interest (see instructions)	18	
	19 Charitable contributions	19	
	20 Depreciation from Form 4562 not claimed on Form 1125-A or elsewhere on return (attach Form 4562)	20	
	21 Depletion	21	
	22 Advertising	22 452,998.	
	23 Pension, profit-sharing, etc., plans	23	
	24 Employee benefit programs	24	
	25 Energy efficient commercial buildings deduction (attach Form 7205)	25	
	26 Other deductions (attach statement)	26 2,557,348.	
	27 Total deductions. Add lines 12 through 26	27 3,452,215.	
Tax, Refundable Credits, & Payments	28 Taxable income before net operating loss deduction and special deductions. Subtract line 27 from line 11	28 2,100.	
	29a Net operating loss deduction (see instructions)	29a	
	b Special deductions (Schedule C, line 24)	29b	
	c Add lines 29a and 29b	29c	
	30 Taxable income. Subtract line 29c from line 28. See instructions.	30 2,100.	
	31 Total tax (Schedule J, Part I, line 11)	31 441.	
	32 Reserved for future use	32	
	33 Total payments and credits (Schedule J, Part III, line 23)	33	
	34 Estimated tax penalty. See instructions. Check if Form 2220 is attached. <input type="checkbox"/>	34	
	35 Amount owed. If line 33 is smaller than the total of lines 31 and 34, enter amount owed	35 441.	
	36 Overpayment. If line 33 is larger than the total of lines 31 and 34, enter amount overpaid	36	
	37 Enter amount from line 36 you want: Credited to 2024 estimated tax Refunded	37	

Sign Here
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer _____ Date _____ Title _____

May the IRS discuss this return with the preparer shown below? See instructions. ☒ Yes ☐ No

Paid Preparer Use Only

Print/Type preparer's name
Andi Oparaku, CPA

Preparer's signature
Andi Oparaku, CPA

Date
04/23/2024

Check ☐ if self-employed **PTIN**
P01236123

Firm's name
Alba Translations CPA LLC

Firm's EIN
46-4259127

Firm's address
12-45 River Rd

Fair Lawn, NJ 07410

Phone no.
(201)952-4519